Attorney Docket No. 0941-0880P

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	LOW PROFILE 1	RANSFORME	.R					
Fill in Appropriate	the specification of w	nich is attached	hereto. If not attached he	reto,		20		
Information -	the specification	was med on	hor			as		
For Use Without Specification	and amended on	pheadon Num	Det		(if applicabl	le) and/or		
Attached:	the specification	was filed on			as ; (if applicable) and/or as PCT			
· · · · · · · · · · · · · · · · · · ·	International Ap	plication Numl	oer	as PCT				
	amended under	PCT Article 19	on		(if applicable)			
	amended by any ame I acknowledge to Regulations, \$1.56. I do not know an thereof, or patented of year prior to this application to this application to this application to the presentative or assipatent or inventor's capplication by me or I hereby claim to or inventor's certification.	ndment referre, the duty to dis and do not believed to discribed in discribed in discribed in the inviton in any cougns more than ertificate on the my legal represeries priority are listed below a side discribed to discribe the discribed below a listed below a	d to above. close information which the same was ever known y printed publication in e same was not in publication has not been pate intry foreign to the Unit twelve months (six mon is invention has been file?	is material to patentabile on or used in the United States or on sale in the United or made the subject ted States of America of the for designs of the States of America of the states	ntified specification, including lity as defined in Title 37, C States of America before my on y or our invention thereof or nited States of America more of an inventor's certificate is on an application filed by me this application, and that no to the United States of Americal (a)-(d) of any foreign application for patent or inventor's ce	ode of Federal or our invention more than one e than one year sued before the ne or my legal application for ica prior to this		
	Prior Foreign Appl	ication(s)			Priority	Claimed		
Insert Priority	·			,				
Information:	(Number)	(Country	λ	(Month/Day/Year I	Filed) L	∐ No		
(if appropriate)	(Number)	(Country	)	(WORLIN Day) Teal I	rueu) res	140		
	(Number)	(Country	·)	(Month/Day/Year I	Filed) Yes	No		
	(Number)	(Country	·)	(Month/Day/Year I		No		
Insert Provisional Application(s): (if any)	I hereby claim the ber		35, United States Code, §	119(e) of any United State (Filing Date)	es provisional applications(s)	listed below.		
	(Application Number)			(Filing Date)				
	All Foreign Applicati		any Patent or Inventor's (	Certificate Filed More tha	n 12 Months (6 Months for D	esigns) Prior to		
	Country		Application Number	Date o	of Filing (Month/Day/Year)			
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PC application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclos information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
Incort Price II C	09/730,848		December 7,	2000 Pen	ding			
Insert Prior U.S. Application(s): (if any)	(Application Number	)	(Filing Date)		s - patented, pending, abando	ned)		
Page 1 of 2	(Application Number	)	(Filing Date)	(Statu	s - patented, pending, abando	ned)		

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
Joseph A. Kolasch	(Reg. No. 22,463)	James M. Slattery	(Reg. No. 28,380)
Bernard L. Sweeney	(Reg. No. 24,448)	Michael K. Mutter	(Reg. No. 29,680)
Charles Gorenstein	(Reg. No. 29,271)	Gerald M. Murphy, Jr.	(Reg. No. 28,977)
Leonard R. Svensson	(Reg. No. 30,330)	Terry L. Clark	(Reg. No. 32,644)
Andrew D. Meikle	(Reg. No. 32,868)	Marc S. Weiner	(Reg. No. 32,181)
Joe McKinney Muncy	(Reg. No. 32,334)	Donald J. Daley	(Reg. No. 34,313)
John W. Bailey	(Reg. No. 32,881)	John A. Castellano	(Reg. No. 35,094)
Gary D. Yacura	(Reg. No. 35,416)		

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

or

Customer No. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed

Insert Residence Insert Citizenship

Insert Post Office Address

Full Name of Second Inventor: Insert Name of Inventor Insert Date This Document is Signed

Insert Residence Insert Citizenship Insert Post Office Address

Full Name of First or Sole Inventor: Insert Name of Inventor -Insert Date This Document is Signed

Insert Residence Insert Citizenship Insert Post Office Address

Full Name of Second Inventor: Insert Name of Inventor Insert Date This Document is Signed

Insert Residence Insert Citizenship Insert Post Office Address I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVEN	NTOR'S SIGNATURE		DATE*	
Jau-Jen Du	. 7	mJen D		Decol	. S 60
(family name: Du	, \	men d	Q	Dec. 01,	•
Residence (City, State & Country)			CITIZ	ENSHIP	
Taoyuan, Taiwan, R.O.C.			Taiv	van, R.O.C.	
POST OFFICE ADDRESS (Complete Street	Address inclu	ding City, State & Co	untry)		
252, Shang Ying Rd., Kuei Sar	n, Taoyuan	n Hsien 333, Ta	aiwan, R.	o. c.	
GIVEN NAME/FAMILY NAME	INVEN	NTOR'S SIGNATURE		DATE*	
Ming Yeh	12	1	۸		
(family name: Yeh	, 9	v 3		Dre. 01	ر ا
Residence (City, State & Country)			CITIZ	ENSHIP	•
Taoyuan, Taiwan, R.O.C.			Taiv	wan, R.O.C.	
				•	
POST OFFICE ADDRESS (Complete Street	Address inclu	ding City, State & Co			
			untry)		
POST OFFICE ADDRESS (Complete Street	n, Taoyuan		untry) aiwan, R.		
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar	n, Taoyuan	n Hsien 333, Ta	untry) aiwan, R.	o. c.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name:	n, Taoyuan	n Hsien 333, Ta	untry)	O. C.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME	n, Taoyuar	n Hsien 333, Ta	untry)	o. c.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name: Residence (City, State & Country)	n, Taoyuan	n Hsien 333, Ta	untry) aiwan, R.	O. C.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name:	n, Taoyuan	n Hsien 333, Ta	untry) aiwan, R.	O. C.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name: Residence (City, State & Country)	n, Taoyuan	n Hsien 333, Ta	untry) aiwan, R.	O. C.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name: Residence (City, State & Country)	INVEN	n Hsien 333, Ta	untry) aiwan, R. CITIZ	O. C.	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name:  Residence (City, State & Country)  POST OFFICE ADDRESS (Complete Street	INVEN	n Hsien 333, Ta	untry) aiwan, R. CITIZ	O. C. DATE*	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name:  Residence (City, State & Country)  POST OFFICE ADDRESS (Complete Street GIVEN NAME/FAMILY NAME	INVEN	n Hsien 333, Ta	untry) aiwan, R. CITIZ	O. C. DATE*	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name: Residence (City, State & Country)  POST OFFICE ADDRESS (Complete Street GIVEN NAME/FAMILY NAME	INVEN	n Hsien 333, Ta	CITIZ	O. C. DATE*  DATE*	
POST OFFICE ADDRESS (Complete Street 252, Shang Ying Rd., Kuei Sar GIVEN NAME/FAMILY NAME  (family name:  Residence (City, State & Country)  POST OFFICE ADDRESS (Complete Street GIVEN NAME/FAMILY NAME	INVEN	n Hsien 333, Ta	CITIZ	O. C. DATE*	